Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>3-22-2008</u>	Address:	<u>56286 Burt Ave</u>
Case #:	<u>241-29106</u>		Elkhart, IN
County:	<u>Elkhart</u>		<u>46516</u>
Operation	aboratory Seizure (check one) onal Lab al/Glassware/Equipment (only) to (only)	Seizure Location (o ☐ Residence ☐ Outbuilding ☐ Vehicle	theck all that apply) If otel/Motel Open No Structure Other:
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply) Lithium/Ammonia Reaction(s): Basement Red Phosphorous/Iodine Reaction(s): Flammable Solvents: Basement Water Reactive Metal (Lithium): Anhydrous Ammonia: Hydrochloric Acid Gas Generator(s): Basement Corrosive Acid: Kitchen Corrosive Base: Other (item and location):			
Child under age 18 discovered (check one) Yes (number present) No			

For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>Dep. Shot. Elkhart County</u> Phone <u>574-533-8644</u>

^{**} This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

^{***} This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.